2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# L99000000364

Entity Name: AFFORDABLE QUALITY MANUFACTURED HOUSING, L.L.C.

Current Principal Place of Business:

2990 SW 54
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

888 SOUTHEAST THIRD AVENUE
501
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 65-0893287 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FORMAN, M. AUSTIN
888 SOUTHEAST THIRD AVENUE
501
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	CAMERON, CLAY	
Address:	888 SE THIRD AVENUE, SUITE 501	
City-St-Zip:	FORT LAUDERDALE, FL 33316	
Title:	MGR	( ) Delete
Name:	FORMAN, M. AUSTIN	
Address:	888 SE THIRD AVENUE, SUITE 501	
City-St-Zip:	FORT LAUDERDALE, FL 33316	
Title:	MGR	( ) Delete
Name:	FORMAN, WALTER	
Address:	6254 MICHAEL STREET	
City-St-Zip:	JUPITER, FL 33458	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLAY CAMERON MGR 04/29/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date